

Imperative Conceptions.—Dr. H. C. Wood (*Medical and Surgical Reporter*, Jan. 23, 1886) reports the following cases of imperative conceptions. One was in a man who, when a boy of eight or nine, going to school, commenced to put up the lapel of his coat, “hiking” it up as it were; he was reasoned with and punished for this action, but all to no purpose. He next commenced to rub up and down the sides of his coat with the coat sleeves; this practice lasted for years. Then came the imperative conception that he was in danger of personal contamination, and he could not be induced to touch the outside of his coat; some one else had to take it off for him. He then got the idea that he could never complete an act. He is rational, his memory is good, and he attends actively to business. He reasons about his condition, recognizes the absurdity of it, but argues his inability to resist. If he lays down a sheet of paper on the table, he must get it straight, and *it never is straight*; thus, for hours he will fool with this sheet of paper, never satisfied that he has it right. He will often consume two hours at night getting his coat off (without touching the outside) and getting it *straight* on the chair. He realizes his infirmity, and claims that he resists it, but compares this resistance to one endeavoring not to breathe; he is ultimately *forced* to yield. The most common form of this affection is the fear of contamination by filth. The second case occurred in a female who will have no money about her save crisp, clean, new bank-notes; she will not touch her outside dress, and is continually washing her hands; she knows they are not dirty, but cannot control this impulse. She would starve to death in a room rather than touch a knob to open the door. On one occasion, when giving her a prescription, he laid the paper on the arm of her chair (to test her); she would not touch it, for “you know, doctor, so many persons touch this chair.” Meeting her on the street one day, he extended his hand; with profuse apologies, she declined to shake his hand, on the score of contamination. Dr. Wood told the man who could not touch the outside of his coat for fear of contamination, that if he were in his place, he would get on the wildest horse he could find, and he was quite sure that when the horse commenced to rear and kick he would grab hold of him, no matter how dirty the horse might be. The remedy was not tried. And such a remedy would not only not act longer than the man was on the horse, but would thereafter increase the disease.

Early Stages of Dementia.—Dr. Henry Sutherland (*Lancet*, Dec. 24, 1885) cites the following as symptoms precedent to parietic dementia. An inability to speak, write, walk, sing, read, or fix the attention as well as usual; a feeling when conversing with others that a blank had taken possession of the mind, rendering the patient unable for the moment to answer a simple question; a sensation of great fatigue

after a short walk, and of utter prostration after any unusual exertion; a feeling of "pins and needles" in the feet and knees without adequate cause, such as pressure upon the sciatic nerves and popliteal arteries, or exposure to cold; an inability to adjust the iris as rapidly as usual after looking at a near object and then turning suddenly to one more distant; a fixed squint, lasting several minutes, unaccompanied by loss of consciousness or epileptiform attacks, but yet causing much alarm and distress to the patient; a sensation as if hot irons were dragged along the forearms; sexual desire and erectile power much diminished, or morbid, erotic desires toward women, especially in cases where the symptoms have been caused by a blow on the head or spine; tremor of the feet in performing simple actions, such as getting out of cabs or walking down stairs; tremor in the hands in writing or any work requiring delicate manipulation; slight vertigo; profound depression without adequate cause, occasionally succeeded by inappropriate outbursts of merriment; nervousness and a love of solitude, yet accompanied by a dread of being alone; a general feeling of malaise which cannot be accounted for, succeeded, if the disease be not checked, by the comfortable sensations of advanced paretic dementia.

Race and Paretic Dementia.—Dr. J. G. Kiernan (*Alienist and Neurolog.*, Jan., 1886) says that there came under his observation in the Cook County Hospital for the Insane 921 cases of insanity, of which 83, or nine per cent., were cases of paretic dementia. The races attacked by paretic dementia were as follows:

RACES.	Male.	Female.	Total.
ARYAN.			
<i>Teutonic.</i>			
German	11	1	12
" American	1		1
" Austrian	1		1
" Swiss	1		1
Hollanders	4	1	5
Anglo-Saxons, American	17	1	18
" English	3		3
" " Scotch	1		1
Scandinavian, Danish	1	1	2
" Swedish	2	2	4
" Norwegian	1		1
<i>Celtic.</i>			
Irish	17	7	24
<i>Latin.</i>			
French	1		1
French-Canadian	2		2
<i>Slavonic.</i>			
Polish	1		1
SCHEMITIC.			
Hebrew	1		1
NEGRO	5		5
	70	13	83